

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICARISINGPAC.ORG	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542902 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee TARGETED VICTORY		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 12 / 15 / 2015</div> </div>	
Mailing Address 1033 NORTH FAIRFAX STREET		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE.8787 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 12 / 15 / 2015</div> </div>
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee WERPOLITICS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 12 / 15 / 2015</div> </div>	
Mailing Address 825 10TH STREET, NW SUITE 1079		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13500.00</div>	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SE.8785 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 12 / 10 / 2015</div> </div>
Purpose of Expenditure DIGITAL PRODUCTION		Category/ Type	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">15500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATTHEW RHOADES

[Electronically Filed]

Date

MM / DD / YYYY
12 / 16 / 2015

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SE
Transaction ID : SE.8787

DUE TO A FEC SOFTWARE PROBLEM, THE CORRECT AGGREGATE NUMBER FOR THE CALENDAR YEAR-
TO-DATE PER ELECTION SOUGHT DOES NOT APPEAR. THE CORRECT AGGREGATE NUMBER SHOULD BE
\$15,500

Form/Schedule:
Transaction ID: